APPLICATION FOR DUPLICATE CERTIFICATE OF OWNERSHIP

STATE OF NEW JERSEY
MOTOR VEHICLE COMMISSION
SPECIAL SERVICES
P.O. BOX 017
TRENTON, NEW JERSEY 08666-0017

ABOVE SPACE IS FOR OFFICE USE ONLY

INSTRUCTIONS - PLEASE READ CAREFULLY

- 1. This form is to be completed by the **titled owner(s)** Please type or print clearly.
- A \$25.00 check or money order (Do Not Send Cash) and a copy of the current or expired registration certificate or insurance identification card must accompany this application. Mail this information to the Trenton Central Office or bring in person to any motor vehicle agency or regional service center with Proof of Identity.

1. NAME OF TITLED OWNER(s)								
	OWNER(s) NEW JERSEY DRIVER LICENSE NUMBER							
	DATE OF BIRTH	ATE OF BIRTH			EYE COLOR			
ADDRESS								
	NO. AN	D STREET		CITY		STATE	ZIP CODE	
	DESCRIPTION OF VEHICLE							
2.	LICENSE PLATE NO	CENSE PLATE NOMAKEYEARBODY TYPEMODI						
	WEIGHT CLASS COMPLETE VEHICLE INDENTIFICATION NUMBER							
3.	Are there any encumbrances or liens against the vehicle at the present time? YES NO If "YES", give name and address of lienholder:							
	NAME							
	NO. AND STREET			CITY		STATE	ZIP CODE	
	NOTE: If the original certificate was issued subject to lien, and lienholder has not submitted evidence of satisfaction, a duplicate certificate of ownership will not be issued until proof of payment is received from the lienholder.							
R.S. 39:10-12"A person who falsely states, in any application to the Chief Administrator for a duplicate certificate of ownership, that a certificate of ownership, or title papers, are lost, shall be subject to a fine of not less than two hundred dollars (\$200.00) nor more than five hundred dollars (\$500.00) or imprisonment for a term not exceeding thirty days or both."								
This application is submitted to the Chief Administrator of the Motor Vehicle Commission because the whereabouts of the title paper for the motor vehicle described herein-owned by the undersigned IS UNKNOWN and certification is hereby made that it IS LOST.								
lt i	is further certified that the _	YEAR	MAKE	VEHIC	LE IDENTIF	FICATION NUM	/BER	
was physically examined by me and the identification number is as entered hereon. I certify that I have compared this number with the numbers shown on the evidence of ownership and on my application for a duplicate New Jersey Certificate of Ownership and they agree. I further certify that I have read and understand this application and that all statements are correct.								
_	DATE	-1111		SIGNA	ATURE OF A	APPLICANT(s)		
	(IF PARTNERSHIP, SO INDICATE, IF CORPORATION, GIVE TITLE OF OFFICER)							

IF NOT FILLED IN ENTIRELY AND ACCOMPANIED BY CHECK OR MONEY ORDER (IF MAILED, DO NOT SEND CASH) THIS APPLICATION WILL BE REJECTED.